



AP 1000
1645

PATENT
Attorney Docket No. FJN-077

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Tani *et al.*

APPLICATION NO.: 09/423,905 GROUP NO.: 1645

FILING DATE: November 16, 1999 EXAMINER: Patricia A. Duffy

TITLE: Therapeutic Agent For Preventing and/or Treating Sepsis

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any documents referred to as enclosed herein, are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 7th day of April, 2005.


Brenda L. MacLean

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith are:

1. Transmittal Form (1 pg.);
2. Change of Correspondence Address For Application (1 pg.); and
3. a return receipt postcard.

**TRANSMITTAL
FORM**

APR 11 2005

<p style="text-align: center;">TRANSMITTAL FORM</p>	Application Number	09/423,905
	Filing Date	November 16, 1999
	First Named Inventor	Tani
	Group Art Unit	1645
	Examiner Name	Patricia A. Duffy
	Attorney Docket No.	FJN-077

ENCLOSURES (check all that apply)

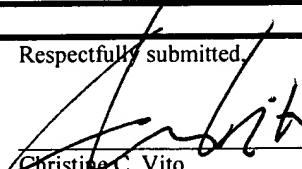
<input type="checkbox"/> Fee Transmittal Form <ul style="list-style-type: none"> <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form 	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences
<input type="checkbox"/> Amendment/Response <ul style="list-style-type: none"> <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]	<input type="checkbox"/> Formal Drawing(s)	<input type="checkbox"/> Appeal Brief (in triplicate)
	<input type="checkbox"/> Request For Continued Examination (RCE) Transmittal	<input type="checkbox"/> Status Inquiry
	<input type="checkbox"/> Power of Attorney By Assignee of Entire Interest/Revocation of Prior Powers and New Power of Attorney	<input checked="" type="checkbox"/> Return Receipt Postcard
	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 (1 page)
<input type="checkbox"/> Petition for Extension of Time	<input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application	<input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Information Disclosure Statement <ul style="list-style-type: none"> <input type="checkbox"/> Form PTO-1449 <input type="checkbox"/> Copies of IDS Citations 	<input type="checkbox"/> Small Entity Statement	<input type="checkbox"/> Change of Correspondence Address For Application (1 page)
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD(s) for large table or computer program	
<input type="checkbox"/> Sequence Listing submission <ul style="list-style-type: none"> <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above 	<input type="checkbox"/> Amendment After Allowance	
	<input type="checkbox"/> Request for Certificate of Correction <ul style="list-style-type: none"> <input type="checkbox"/> Certificate of Correction (in duplicate) 	

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Date: April 7, 2005
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Respectfully submitted,

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O I P E
APR 11 2005
PATENT & TRADEMARK OFFICE

PATENT
Attorney Docket No. FJN-077

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Tani *et al.* CONFIRMATION NO.: 7282
SERIAL NO.: 09/423,905 GROUP NO.: 1645
FILING DATE: November 16, 1999 EXAMINER: Duffy, Patricia Ann
TITLE: Therapeutic Agent for Preventing and/or Treating Sepsis

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

CHANGE OF CORRESPONDENCE ADDRESS FOR APPLICATION

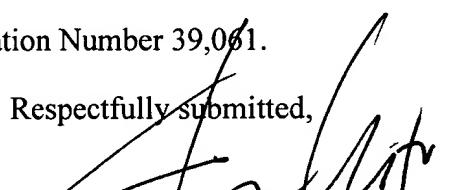
Sir:

Please change the Correspondence Address for the above-identified patent application to the address associated with:

Customer Number 022832.

I am the Attorney of record, Registration Number 39,061.

Respectfully submitted,


Christine C. Vito
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